



Patient Copay Schedule

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PRODUCT: D0032606 (UHC Healthplex ASO Custom NY Only Plan 73P18)

ADA	Description	MEMBER PAYS
Diagnostic		
D0120	periodic oral evaluation	\$4.50
D0140	limited oral evaluation - problem focused	\$4.50
D0150	comprehensive oral evaluation - new or established patient	\$10.00
D0160	detailed and extensive oral evaluation - problem-focused, by report	\$4.50
D0210	intraoral - comprehensive series of radiographic images	\$14.50
D0220	intraoral - periapical first radiographic image	\$3.80
D0230	intraoral - periapical each additional radiographic image	\$1.05
D0240	intraoral - occlusal radiographic image	\$9.00
D0250	extraoral - 2D projection radiographic image created using a stationary radiation source and detector	\$1.05
D0270	bitewing - single radiographic image	\$4.55
D0272	bitewings - two radiographic images	\$4.60
D0273	bitewings - three radiographic images	\$4.65
D0274	bitewings - four radiographic images	\$4.70
D0330	panoramic radiographic image	\$19.00
D0340	2D cephalometric radiographic image - acquisition, measurement and analysis	\$19.00
D0372	intraoral tomosynthesis - comprehensive series of radiographic images	\$14.50
D0373	intraoral tomosynthesis - bitewing radiographic image	\$4.70
D0374	intraoral tomosynthesis - periapical radiographic image	\$3.80
D0387	intraoral tomosynthesis - comprehensive series of radiographic images - image capture only	\$14.50
D0388	intraoral tomosynthesis - bitewing radiographic image - image capture only	\$4.70
D0389	intraoral tomosynthesis - periapical radiographic image - image capture only	\$3.80
D0470	diagnostic casts	\$17.40
D0601	caries risk assessment and documentation, with a finding of low risk	\$0.00
D0602	caries risk assessment and documentation, with a finding of moderate risk	\$0.00
D0603	caries risk assessment and documentation, with a finding of high risk	\$0.00
Preventive		
D1110	prophylaxis - adult	\$13.50
D1120	prophylaxis - child	\$10.25
D1206	topical application of fluoride varnish	\$17.10
D1208	Topical application of fluoride - excluding varnish	\$17.10
D1330	oral hygiene instructions	\$0.00
D1351	sealant - per tooth	\$30.00
D1352	preventive resin restoration - permanent tooth	\$30.00
D1353	sealant repair - per tooth	\$30.00
D1354	application of caries arresting medicament application - per tooth	\$30.00
D1355	caries preventive medicament application - per tooth	\$30.00
D1510	space maintainer - fixed, unilateral - per quadrant	\$51.50
D1516	space maintainer - fixed - bilateral, maxillary	\$106.50
D1517	space maintainer - fixed - bilateral, mandibular	\$106.50
D1520	space maintainer - removable, unilateral - per quadrant	\$85.00
D1526	space maintainer - removable - bilateral, maxillary	\$85.00



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D1527	space maintainer - removable - bilateral, mandibular	\$85.00
D1575	distal shoe space maintainer - fixed, unilateral - per quadrant	\$51.50
D1701	Pfizer-BioNTech Covid-19 vaccine administration - first dose	\$0.00
D1702	Pfizer-BioNTech Covid-19 vaccine administration - second dose	\$0.00
D1703	Moderna Covid-19 vaccine administration - first dose	\$0.00
D1704	Moderna Covid-19 vaccine administration - second dose	\$0.00
D1705	AstraZeneca Covid-19 vaccine administration - first dose	\$0.00
D1706	AstraZeneca Covid-19 vaccine administration - second dose	\$0.00
D1707	Janssen Covid-19 vaccine administration	\$0.00
D1999	Unspecified preventive procedure, by report	\$0.00
Restorative		
D2140	amalgam - one surface, primary or permanent	\$23.50
D2150	amalgam - two surfaces, primary or permanent	\$26.50
D2160	amalgam - three surfaces, primary or permanent	\$28.50
D2161	amalgam - four or more surfaces, primary or permanent	\$39.50
D2330	resin-based composite - one surface, anterior	\$27.00
D2331	resin-based composite - two surfaces, anterior	\$30.50
D2332	resin-based composite - three surfaces, anterior	\$37.00
D2335	resin-based composite - four or more surfaces (anterior)	\$37.00
D2391	resin-based composite - one surface, posterior	\$23.50
D2392	resin-based composite - two surfaces, posterior	\$26.50
D2393	resin-based composite - three surfaces, posterior	\$28.50
D2394	resin-based composite - four or more surfaces, posterior	\$39.50
D2410	gold foil - one surface	\$165.00
D2510	inlay - metallic - one surface	\$103.00
D2520	inlay - metallic - two surfaces	\$137.00
D2530	inlay - metallic - three or more surfaces	\$156.00
D2542	onlay metallic, two surfaces	\$62.00
D2610	inlay - porcelain/ceramic - one surface	\$130.90
D2620	inlay - porcelain/ceramic - two surfaces	\$130.90
D2630	inlay - porcelain/ceramic - three or more surfaces	\$130.90
D2663	onlay - composite/resin - three surfaces	\$400.00
D2710	crown, resin-based composite (indirect)	\$58.00
D2720	crown - resin with high noble metal	\$232.50
D2721	crown - resin with predominantly base metal	\$215.00
D2722	crown - resin with noble metal	\$215.00
D2740	crown - porcelain/ceramic	\$215.00
D2750	crown - porcelain fused to high noble metal	\$309.50
D2751	crown - porcelain fused to predominantly base metal	\$232.50
D2752	crown - porcelain fused to noble metal	\$232.50
D2753	crown - porcelain fused to titanium and titanium alloys	\$309.50
D2780	crown, 3/4 cast high noble metal	\$114.00
D2790	crown - full cast high noble metal	\$299.50



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ADA	Description	MEMBER PAYS
D2791	crown - full cast predominantly base metal	\$197.00
D2792	crown - full cast noble metal	\$197.00
D2910	recement or re-bond inlay, onlay, veneer or partial coverage restoration	\$18.00
D2920	recement or re-bond crown	\$14.75
D2921	reattachment of tooth fragment, incisal edge or cusp	\$14.75
D2930	prefabricated stainless steel crown - primary tooth	\$39.00
D2931	prefabricated stainless steel crown - permanent tooth	\$39.00
D2940	protective restoration	\$45.00
D2950	Core buildup, including any pins when required	\$100.00
D2951	pin retention - per tooth, in addition to restoration	\$12.00
D2952	cast post and core in addition to crown	\$98.50
D2953	each additional indirectly fabricated post, same tooth	\$98.50
D2954	prefabricated post and core in addition to crown	\$53.50
D2960	labial veneer (resin laminate) - direct	\$125.00
D2962	labial veneer (porcelain laminate) - indirect	\$395.00
Endodontics		
D3110	pulp cap - direct (excluding final restoration)	\$12.40
D3120	pulp cap - indirect (excluding final restoration)	\$12.40
D3220	therapeutic pulpotomy (excluding final restoration)	\$20.70
D3230	pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration)	\$20.70
D3240	pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration)	\$20.70
D3310	endodontic therapy, anterior tooth (excluding final restoration)	\$150.00
D3320	endodontic therapy, premolar tooth (excluding final restoration)	\$150.00
D3330	endodontic therapy, molar tooth (excluding final restoration)	\$187.50
D3346	retreatment of previous root canal therapy - anterior	\$175.00
D3347	retreatment of previous root canal therapy - bicuspid	\$180.00
D3348	retreatment of previous root canal therapy - molar	\$225.00
D3410	Apicoectomy - anterior	\$101.50
D3421	Apicoectomy - premolar (first root)	\$82.50
D3425	Apicoectomy - molar (first root)	\$123.50
D3426	Apicoectomy (each additional root)	\$19.00
D3430	retrograde filling - per root	\$25.50
D3431	biologic materials to aid in soft and osseous tissue regeneration in conjunction with periradicular surgery	\$0.00
D3450	root amputation - per root	\$51.10
D3471	surgical repair of root resorption - anterior	\$101.50
D3472	surgical repair of root resorption - premolar	\$82.50
D3473	surgical repair of root resorption - molar	\$123.50
D3501	surgical exposure of root surface without apicoectomy or repair of root resorption - anterior	\$101.50
D3502	surgical exposure of root surface without apicoectomy or repair of root resorption - premolar	\$101.50
D3503	surgical exposure of root surface without apicoectomy or repair of root resorption - molar	\$101.50
D3911	intraorifice barrier	\$23.50
D3920	hemisection (including any root removal), not including root canal therapy	\$110.50



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ADA	Description	MEMBER PAYS
Periodontics		
D4210	gingivectomy or gingivoplasty - four or more contiguous teeth or tooth bounded spaces per quadrant	\$65.00
D4211	gingivectomy or gingivoplasty - one to three contiguous teeth or tooth bounded spaces per quadrant	\$15.50
D4240	gingival flap procedure, including root planing - four or more contiguous teeth or tooth bound spaces per quadrant	\$275.00
D4249	clinical crown lengthening - hard tissue	\$325.00
D4260	osseous surgery (including flap entry and closure) - four or more contiguous teeth or tooth bounded spaces per quadrant	\$152.50
D4261	osseous surgery (including flap entry and closure) - one to three contiguous teeth or tooth bounded spaces per quadrant	\$175.00
D4263	Bone replacement graft - retained natural tooth - first site in quadrant	\$175.00
D4266	guided tissue regeneration, natural teeth - resorbable barrier, per site	\$175.00
D4267	guided tissue regeneration, natural teeth - non-resorbable barrier, per site	\$210.00
D4270	pedicle soft tissue graft procedure	\$130.00
D4277	free soft tissue graft procedure (including recipient and donor surgical sites)first tooth, implant, or edentulous tooth	\$275.00
D4278	free soft tissue graft procedure (including donor site surgery), each additional contiguous tooth or edentulous position	\$275.00
D4286	removal of non-resorbable barrier	\$210.00
D4341	periodontal scaling and root planing - four or more teeth per quadrant	\$47.50
D4342	periodontal scaling and root planing - one - three teeth, per quadrant	\$23.75
D4346	scaling in presence of generalized moderate or severe gingival inflammation	\$13.50
D4910	periodontal maintenance	\$36.00
Prosthodontics, Removable		
D5110	complete denture - maxillary	\$282.50
D5120	complete denture - mandibular	\$282.50
D5130	immediate denture - maxillary	\$310.00
D5140	immediate denture - mandibular	\$310.00
D5211	maxillary partial denture - resin base (including retentive/clasping materials, rests, and teeth)	\$134.50
D5212	mandibular partial denture - resin base (including retentive/clasping materials, rests, and teeth)	\$134.50
D5213	maxillary partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests	\$332.50
D5214	mandibular partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rest	\$332.50
D5221	immediate maxillary partial denture - resin base (including retentive/clasping materials, rests and teeth)	\$134.50
D5222	immediate mandibular partial denture - resin base	\$134.50
D5223	immediate maxillary partial denture - cast metal framework with resin denture bases (including retentive/clasping materi	\$332.50
D5224	Immediate mandibular partial denture - cast metal framework with resin denture bases (including retentive/clasping mater	\$332.50
D5225	maxillary partial denture - flexible base (including retentive/clasping materials, rests, and teeth)	\$332.50
D5226	mandibular partial denture - flexible base (including any retentive/clasping materials, rests, and teeth)	\$332.50
D5227	immediate maxillary partial denture - flexible base (including any clasps, rests and teeth)	\$134.50
D5228	immediate mandibular partial denture - flexible base (including any clasps, rests and teeth)	\$134.50
D5282	removable unil partial denture - one piece cast metal (includ retentive/clasping materials, rests, and teeth), maxillary	\$347.50
D5283	removable unil partial denture - one piece cast metal (incl. retentive/clasping materials, rests, and teeth), mandibular	\$347.50
D5284	removable unil. part denture - one piece flex. base (incl. retentive/clasping materials, rests, and teeth), per quadrant	\$347.50
D5286	removable unil. part denture - one piece resin (incl. retentive/clasping materials, rests, and teeth), per quadrant	\$347.50
D5410	adjust complete denture - maxillary	\$8.00
D5411	adjust complete denture - mandibular	\$8.00
D5421	adjust partial denture - maxillary	\$8.00



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ADA	Description	MEMBER PAYS
D5422	adjust partial denture - mandibular	\$8.00
D5511	repair broken complete denture base, mandibular	\$19.50
D5512	repair broken complete denture base, maxillary	\$19.50
D5520	replace missing or broken teeth - complete denture (each tooth)	\$19.50
D5611	repair resin partial denture base, mandibular	\$19.50
D5612	repair resin partial denture base, maxillary	\$19.50
D5621	repair cast partial framework, mandibular	\$47.00
D5622	repair cast partial framework, maxillary	\$47.00
D5630	repair or replace broken retentive/clasping materials - per tooth	\$23.00
D5640	replace broken teeth - per tooth	\$19.50
D5650	add tooth to existing partial denture	\$4.50
D5660	add clasp to existing partial denture - per tooth	\$5.00
D5710	rebase complete maxillary denture	\$158.50
D5711	rebase complete mandibular denture	\$158.50
D5720	rebase maxillary partial denture	\$158.50
D5721	rebase mandibular partial denture	\$158.50
D5725	rebase hybrid prosthesis	\$158.50
D5730	reline complete maxillary denture (direct)	\$67.00
D5731	reline complete mandibular denture (direct)	\$67.00
D5740	reline maxillary partial denture (direct)	\$44.10
D5741	reline mandibular partial denture (direct)	\$82.60
D5750	reline complete maxillary denture (indirect)	\$70.50
D5751	reline complete mandibular denture (indirect)	\$114.50
D5760	reline maxillary partial denture (indirect)	\$67.00
D5761	reline mandibular partial denture (indirect)	\$100.00
D5765	soft liner for complete or partial removable denture - indirect	\$28.00
D5850	tissue conditioning, maxillary	\$28.00
D5851	tissue conditioning, mandibular	\$0.00
D5863	Overdenture-complete maxillary	\$282.50
D5864	Overdenture-partial maxillary	\$332.50
D5865	Overdenture - complete mandibular	\$282.50
D5866	Overdenture-partial mandibular	\$332.50
Prosthodontics, Fixed		
D6210	pontic - cast high noble metal	\$279.50
D6211	pontic - cast predominantly base metal	\$216.00
D6212	pontic - cast noble metal	\$216.00
D6240	pontic - porcelain fused to high noble metal	\$314.50
D6241	pontic - porcelain fused to predominantly base metal	\$237.50
D6242	pontic - porcelain fused to noble metal	\$237.50
D6243	pontic - porcelain fused to titanium and titanium alloys	\$314.50
D6250	pontic - resin with high noble metal	\$237.50
D6251	pontic - resin with predominantly base metal	\$155.00
D6252	pontic - resin with noble metal	\$155.00



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ADA	Description	MEMBER PAYS
D6545	retainer - cast metal for resin bonded fixed prosthesis	\$132.50
D6710	retainer crown - indirect resin based composite (not to be used as a temporary or provisional crown)	\$237.50
D6720	retainer crown - resin with high noble metal	\$237.50
D6721	retainer crown - resin with predominantly base metal	\$155.00
D6722	retainer crown - resin with noble metal	\$155.00
D6740	retainer crown-porcelain/ceramic	\$314.50
D6750	retainer crown - porcelain fused to high noble metal	\$314.50
D6751	retainer crown - porcelain fused to predominantly base metal	\$237.50
D6752	retainer crown - porcelain fused to noble metal	\$237.50
D6753	retainer crown - porcelain fused to titanium and titanium alloys	\$314.50
D6780	retainer crown - 3/4 cast high noble metal	\$114.00
D6784	retainer crown 3/4 - titanium and titanium alloys	\$114.00
D6790	retainer crown - full cast high noble metal	\$279.50
D6791	retainer crown - full cast predominantly base metal	\$197.00
D6792	retainer crown - full cast noble metal	\$197.00
D6930	re-cement or re-bond fixed partial denture	\$42.25
D6980	fixed partial denture repair, necessitated by restorative material failure	\$64.25
Oral Surgery		
D7140	extraction, erupted tooth or exposed root (elevation and/or forceps removal)	\$35.50
D7210	extraction, erupted tooth req removal of bone,sectioning of tooth and including elevation of mucoperiosteal flap	\$58.50
D7220	removal of impacted tooth - soft tissue	\$87.50
D7230	removal of impacted tooth - partially bony	\$95.00
D7240	removal of impacted tooth - completely bony	\$124.50
D7241	removal of impacted tooth - completely bony, with unusual surgical	\$157.50
D7250	removal of residual tooth roots (cutting procedure)	\$50.00
D7251	coronectomy - intentional partial tooth removal, impacted teeth only	\$124.50
D7260	oroantral fistula closure	\$212.50
D7270	tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	\$120.00
D7280	exposure of an unerupted tooth	\$138.50
D7285	incisional biopsy of oral tissue - hard (bone, tooth)	\$12.50
D7286	incisional biopsy of oral tissue - soft (all others)	\$19.00
D7310	alveoloplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	\$35.00
D7311	alveoloplasty in conjunction with extraction - one to three teeth or tooth spaces, per quadrant	\$17.50
D7320	alveoloplasty not in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	\$85.00
D7410	excision of benign lesion up to 1.25 cm	\$140.00
D7411	excision of benign lesion greater than 1.25 cm	\$190.00
D7440	excision of malignant tumor-lesion diameter up to 1.25 cm	\$140.00
D7441	excision of malignant tumor - lesion diameter greater than 1.25 cm	\$190.00
D7450	removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm	\$77.50
D7451	removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm	\$105.00
D7460	removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm	\$140.00
D7461	removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm	\$190.00
D7509	marsupialization of odontogenic cyst	\$77.50



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D7510	incision and drainage of abscess - intraoral soft tissue	\$49.90
D7956	guided tissue regeneration, edentulous area - resorbable barrier, per site	\$175.00
D7957	guided tissue regeneration, edentulous area - non-resorbable barrier, per site	\$210.00
D7961	buccal / labial frenectomy (frenulectomy)	\$117.00
D7962	lingual frenectomy (frenulectomy)	\$117.00
Orthodontics		
D8080	comprehensive orthodontic treatment of the adolescent dentition	\$250.00
D8210	removable appliance therapy	\$375.00
D8220	fixed appliance therapy	\$395.00
D8670	periodic orthodontic treatment visit	\$24.58
Adjunctive General Services		
D9110	palliative treatment of dental pain - per visit	\$16.25
D9215	local anesthesia in conjunction with operative or surgical procedures	\$0.00
D9222	deep sedation/general anesthesia - first 15 minutes	\$56.67
D9223	deep sedation/general anesthesia-each 15 minute increment	\$56.67
D9239	intravenous moderate (conscious) sedation/anesthesia - first 15 minutes	\$56.67
D9243	intravenous moderate (conscious) sedation/analgesia-each 15 minute increment	\$56.67
D9310	consultation (diagnostic service provided by dentist or physician other than practitioner providing treatment)	\$50.00
D9912	pre-visit patient screening	\$0.00
D9951	occlusal adjustment - limited	\$55.00
D9952	occlusal adjustment - complete	\$150.00
D9974	internal bleaching-per tooth	\$150.00
D9995	teledentistry - synchronous; real-time encounter	\$0.00
D9996	teledentistry-asynchronous; information stored and forwarded to dentist for subsequent review	\$0.00